IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 24565 DATE 8-20-96 TAX MAP NO. 36-6-A-10 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Chris Davidson PHONE: Business 528-6192 Home

ADDRESS PO BOX 5602 Sta

LOCATION Buffalo Shoals Tl Laurel Cove Rd 3rd lot Rt

SUBDIVISION Twelve Oaks BLOCK / SECTION LOT 10 LOT AREA 23000 sf SITE CLASS DESIGN FLOW 240 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 6-9-95
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 840 Linear Feet 280
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☐ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description:
Repair System Description:
Maintenance Agreement Required: ☐ Yes ☐ No

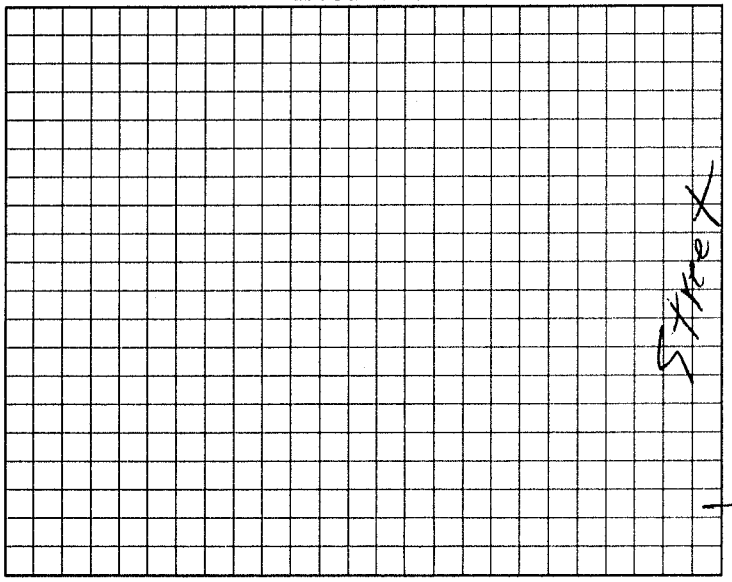
☐ House/Mod. Home No. Bedrooms
☐ Mobile Home No. Bathrooms
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

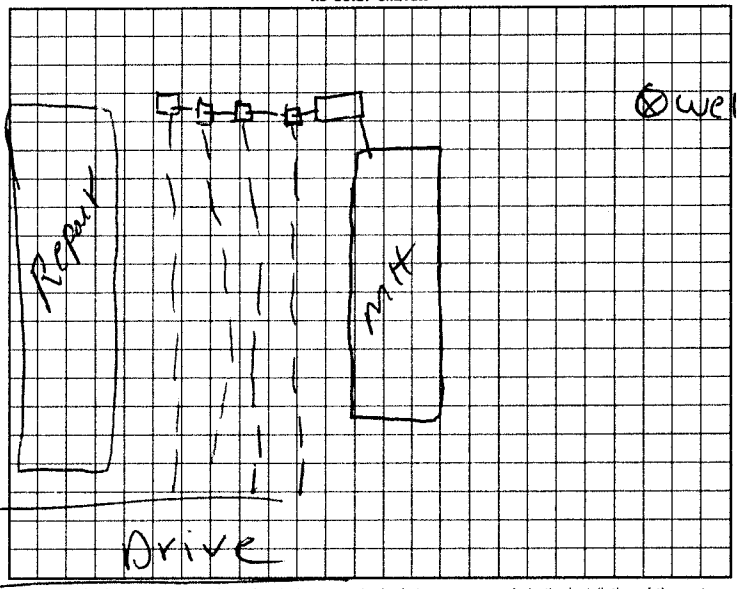
Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system.

Signed:

Improvement Permit by: date

Existing System Inspection by: R. C. Moore date 8-20-96

Installed by: Forest Shuffort

Certificate of Completion by: R.C. Moore date 6-9-95

Operation Permit by: date

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD